PAGE 1 / 22

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	A			JKSEN ized Comi	/IENIS			Office Use On	ly
1. NAME OF COMMITTEE (in		TYPE OR PRIN	Τ ▼		ample: If typin er the lines.	g, type	12FE4M5		
DARIA NOVAI	K FOR CO	ONGRESS	; 						
<u> </u>									
ADDRESS (number ar	nd street)	51 HAMMON	ASSETT	MEADOWS F	ROAD				
Check if did than previous reported. (A	usly	MADISON					СТ	06443	]-[
2. <b>FEC IDENTIFIC</b>	CATION NU	MBER ▼		CITY			STATE A	ZIP (	CODE A
C C005897	13			IS THIS REPORT	X NEW	OR	AMENE (A)	DED	TATE ▼ DISTRICT  CT 05
		eport (Q1)	(b) 1	2-Day <b>PRE</b> -	Election Report Primary (12P) Convention (12P)	_	General (*	,	Runoff (12R)
	r 15 Quarterly			Election on	M = M /	D D /	Y " Y " Y " Y		the ate of
January	/ 31 Year-End	Report (YE)	(c) 3	30-Day POS	<b>r</b> -Election Rep	oort for the:			
					General (30G	)	Runoff (30	OR)	Special (30S)
Termina	ation Report (	TER)		Election on	M M /	D D /	Y Y Y Y		the ate of
5. Covering Period	M 04	/ 20		016 Y	through	M M M	/ 30 /	y y y y 2016	Y
I certify that I have e	examined this	Report and t	o the be	est of my kn	owledge and I	belief it is tr	ue, correct and	d complete.	
Type or Print Name	of Treasurer	J KENNETH	NOWEL	L CPA					
Signature of Treasure	er <i>J KEN</i>	NETH NOWELL	СРА		[Electronically 1	Filed] [	Date 07	15	2016
NOTE: Submission of	false, erroned	ous, or incompl	ete infor	mation may s	subject the per	son signing	this Report to t	he penalties o	f 2 U.S.C. §437g.
Office Use Only								FEC FO	ORM 3 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 22

1 20 1 01111 0 (Hevised 02/2000

Write or Type Committee Name

#### DARIA NOVAK FOR CONGRESS

R	eport	t Covering the Period: From:	04 / 20 / Y Y Y Y Y Y TO:	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	10842.49	23301.87
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10842.49	23301.87
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	7306.77	17030.22
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7306.77	17030.22
8.		sh on Hand at Close of porting Period (from Line 27)	7607.69	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on a sedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on a ledule C and/or Schedule D)	1336.04	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts PAGE 3 / 22 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

### DARIA NOVAK FOR CONGRESS

04 20 2016 06 30 2016 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees  (i) Itemized (use Schedule A)	2046.45	5996.45		
	(ii) Unitemized	3520.54	9522.54		
	(iii) TOTAL of contributions from individuals	5566.99	15518.99		
	(b) Political Party Committees	250.00	250.00		
	(c) Other Political Committees (such as PACs)	5000.00	5727.00		
	(d) The Candidate	25.50	1805.88		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	10842.49	23301.87		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	219.24	1336.04		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	219.24	1336.04		
4.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	11061.73	24637.91		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 22

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	7306.77	17030.22
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
 21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	7306.77	17030.22
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	3852.73
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	11061.73
25.	SUBTOTAL (add Line 23 and Line 24)		14914.46
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	7306.77
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD	7607.69

### SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 22 Use separate schedule(s) (check only one) 11a 11b 11d 11c 12

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) Kenneth Abramowitz Date of Receipt Mailing Address 411 Harbor Road 06 2016 17 City State Zip Code Transaction ID: SA11AI.4485 CT 06890 Southport FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation **NGN** Capital Managing General Partner Memo Item Receipt For: 2016 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Maxwell Merrick Belding Date of Receipt Mailing Address 30 Bokum Road 28 2016 Unit 308 City State Zip Code Transaction ID: SA11AI.4568 CT 06426 Essex FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Retired None Memo Item Receipt For: 2016 Election Cycle-to-Date Primary Meneral Control 600.00 Other (specify) Full Name (Last, First, Middle Initial) William Collier Date of Receipt Mailing Address 4515 North Progress Avenue 2016 14 City State Zip Code Transaction ID: SA11AI.4590 PΑ Harrisburg 17110 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 10.00 Name of Employer Occupation Regal Blue Media Web design Memo Item Receipt For: 2016 Election Cycle-to-Date | General Primary Other (specify) 2710.00 810.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 22 Use separate schedule(s) (check only one) 11a 11d 11b 11c Detailed Summary Page 12

for each category of the 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) William Collier Date of Receipt Mailing Address 4515 North Progress Avenue 2016 14 City State Zip Code Transaction ID: SA11AI.4591 PΑ 17110 Harrisburg FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 10.00 Name of Employer Occupation Regal Blue Media Web design Memo Item Receipt For: 2016 Election Cycle-to-Date Primary X General 2720.00 Other (specify) Full Name (Last, First, Middle Initial) **Darlene Jones** Date of Receipt Mailing Address 358 Cold Spring Road 30 2016 Citv State Zip Code Transaction ID: SA11AI.4542 Westbrook CT 06498 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 150.00 Name of Employer Occupation Auditor CT Department of Labor Memo Item Receipt For: 2016 Election Cycle-to-Date Primary Meneral Control 209.00 Other (specify) Full Name (Last, First, Middle Initial) Betty Lincoln Date of Receipt Mailing Address 246 Whistletown Road 2016 30 City State Zip Code Transaction ID: SA11AI.4601 CT East Lyme 06333 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation None Retired Memo Item Receipt For: 2016 Election Cycle-to-Date X General Primary Other (specify) 225.00 210.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3)

Theroux, Nowell Stoughton LLC

General

Receipt For: 2016

Primary

FOR LINE NUMBER: **PAGE** 7 OF 22 Use separate schedule(s) (check only one) 11a 11b 11c 12 13a 13b 14

for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) Peter Lumaj Date of Receipt Mailing Address 745 Mill Plain Road 06 2016 23 City State Zip Code Transaction ID: SA11AI.4526 CT 06824 Fairfield FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 50.00 Name of Employer Occupation Law Office of Peter Lumaj Attorney Memo Item Receipt For: 2016 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) J Kenneth Nowell Date of Receipt Mailing Address 97 Hickory Road 02 2016 City State Zip Code Transaction ID: SA11AI.4443 Torrington CT 06790 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 476.45 Name of Employer Occupation CPA Theroux, Nowell Stoughton LLC Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 851.45 Other (specify) Convention Full Name (Last, First, Middle Initial) J Kenneth Nowell Date of Receipt Mailing Address 97 Hickory Road 2016 30 City State Zip Code Transaction ID: SA11AI.4596 CT Torrington 06790 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation

CPA

Election Cycle-to-Date

Memo Item

### SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				FAGE	-	O	OF	22	
(che	ck only	or	ne)						
X	11a		11b		11c		11	d	
	12		13a		13b		14	ļ	15

	ports and Statements may not be sold or used by any pen using the name and address of any political committee			
NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CC	DNGRESS			
A. Full Name (Last, First, Middle Initia Jack Orchulli  Mailing Address 446 Hollow Tree R	idge Road	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code CT 06820	Transaction ID : SA11AI.4592		
Darien FEC ID number of contributing federal political committee.	CT 06820	Amount of Each Receipt this Period 400.00		
Name of Employer None	Occupation Retired	Memo Item		
Receipt For: 2016 Primary General Other (specify) Convent	Election Cycle-to-Date			
Full Name (Last, First, Middle Initia		Date of Receipt		
B. Mailing Address		M M / D D / Y Y Y Y		
City	City State Zip Code			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation	Memo Item		
Receipt For:  Primary  General  Other (specify)	Election Cycle-to-Date			
Full Name (Last, First, Middle Initia		Date of Receipt		
C. Mailing Address		M M / D D / Y Y Y Y		
City	City State Zip Code			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation	Memo Item		
Receipt For:  Primary General Other (specify)	Election Cycle-to-Date			
SUBTOTAL of Receipts This Page (o	ptional)	400.00		

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) Enfield Republican Town Committee Date of Receipt Mailing Address 18 Debbie Lane 06 2016 23 City State Zip Code Transaction ID: SA11B.4651 CT 06082 Enfield FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Memo Item Receipt For: 2016 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... 250.00 TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	ly information copied from such Reports and St for commercial purposes, other than using the		
$\rangle$	NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRES	SS	
Α.	Full Name (Last, First, Middle Initial) Grassroots East - Federal  Mailing Address 356 WESTCHESTER ROAD PO BOX 747  City Colchester  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2016 Primary General Other (specify)	State Zip Code CT 06415  C C00492280  Occupation  Election Cycle-to-Date	Date of Receipt  M M M / D D / 2016  Transaction ID : SA11C.4649  Amount of Each Receipt this Period  5000.00  Memo Item
3.	Full Name (Last, First, Middle Initial)  Mailing Address  City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	Occupation  Election Cycle-to-Date	Amount of Each Receipt this Period  Memo Item
Э.	Full Name (Last, First, Middle Initial)  Mailing Address  City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	Occupation  Election Cycle-to-Date	Amount of Each Receipt this Period  Memo Item
s	SUBTOTAL of Receipts This Page (optional)		5000.00
т	OTAL This Period (last page this line number o	nlv)	5000.00

### SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

PAGE 11 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 11d 11b 11a 11c Detailed Summary Page 12 13a 13b

	and Statements may not be sold or used by any p g the name and address of any political committe	
NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGI	RESS	
Full Name (Last, First, Middle Initial)  DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT ME	:ADOWS ROAD	Date of Receipt
		05 27 2016
City MADISON	State Zip Code CT 06443	Transaction ID : SA11D.4653
FEC ID number of contributing federal political committee.	С носто2140	Amount of Each Receipt this Period
Name of Employer ERUdyne	Occupation Founder	25.50  Memo Item In kind - Event attendance
Receipt For: 2016 Primary Seneral Other (specify)	Election Cycle-to-Date 3141.92	In-kind - Event attendance
Full Name (Last, First, Middle Initial)  8. Mailing Address		Date of Receipt
Mailing Address		M M M / D D / Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M M / D D / Y Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional	)	25.50
TOTAL This Period (last page this line num		25.50

Name of Employer

Primary

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Receipt For:

C

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 22

(check only one)

11a 11b 11c 11d

12 X 13a 13b 14 15

Memo Item

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) DARIA IRENE NOVAK Date of Receipt Mailing Address 51 HAMMONASSETT MEADOWS ROAD 05 2016 27 City State Zip Code Transaction ID: SA13A.4639 CT 06443 **MADISON** FEC ID number of contributing Amount of Each Receipt this Period H0CT02140 federal political committee. 219.24 Name of Employer Occupation **ERUdyne** Founder Memo Item Portion of mileage loaned by candidate Receipt For: 2016 Election Cycle-to-Date Primary X General 3116.42 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee.

Other (specify)		
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M M / D D / Y M Y M Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	Memo Item
Receipt For:	Election Cycle-to-Date	_
Primary General		
Other (specify)		
·		

Occupation

Election Cycle-to-Date

219.24

219.24

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER: (check only one)				PAGE	13	OF	22
Use separate schedule(s)								
for each category of the Detailed Summary Page	X	17		18		19a		19b
Detailed Suffiffiary 1 age		20a		20b		20c		21
not be sold or used by any person for the purpose of soliciting contributions								

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement CONNECTICUT REPUBLICAN PARTY 2016 Mailing Address 31 PRATT STREET 4TH FLOOR 29 City State Zip Code Amount of Each Disbursement this Period CT **HARTFORD** 06103 Purpose of Disbursement Booth rental-Convention 250.00 007 Memo Item Candidate Name Category/ Type Transaction ID: SB17.4620 Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) Convention President State: District: Full Name (Last, First, Middle Initial) CONNECTICUT REPUBLICAN PARTY Date of Disbursement D Mailing Address 31 PRATT STREET 4TH FLOOR 05 16 2016 City Zip Code State Amount of Each Disbursement this Period CT **HARTFORD** 06103 Purpose of Disbursement Event attendance 263.49 007 Memo Item Candidate Name Category/ Type Transaction ID: SB17.4642 Disbursement For: Office Sought: 2016 House X General Senate **Primary** Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Darter Specialties Inc. Mailing Address P. O. Box 188 05 02 2016 City Zip Code State Amount of Each Disbursement this Period Cheshire CT 06410 Purpose of Disbursement Stickers & Pins for Convention 476.45 006 Memo Item Candidate Name Category/ Type Transaction ID: SB17.4445 Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) Convention State: District: 989.94 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

CT

State:

### SCHEDULE B ( ITEMIZED DISBU

Image# 201607159020603074		
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 22 (check only one)    X   17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)  DARIA NOVAK FOR CONGRESS	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial)  A. DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT MEADOWS ROAD	)	Date of Disbursement  04 29 2016
City State MADISON CT  Purpose of Disbursement Attendance at dinner	Zip Code 06443	Amount of Each Disbursement this Period 50.00
Candidate Name	Category Type	Memo Item  Transaction ID : SB17.4622
Office Sought:    House   Disbursement Fo		
Full Name (Last, First, Middle Initial)  BARIA IRENE NOVAK		Date of Disbursement
Mailing Address 51 HAMMONASSETT MEADOWS ROAD	)	04 29 2016
CityStateMADISONCT	Zip Code 06443	Amount of Each Disbursement this Period
Purpose of Disbursement Reimburse attendance at events	007	149.00 Memo Item
Candidate Name	Category Type	
Office Sought:    Yaman   House   Disbursement Formary		

C.

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

District:

, ,	First, Middle Initial)	Data of Bishamana		
DARIA IRE	NE NOVAK	Date of Disbursement		
Mailing Address	51 HAMMONASSETT	MEADOWS ROAD		04
City		State Zip Code		Amount of Each Disbursement this Period
MADISON		CT 06443		
Purpose of Disbursement Reimburse postage & business cards			003	175.41 Memo Item
Candidate Name	)		Category/ Type	Transaction ID : SB17.4624
Office Sought:	X House	Disbursement For: 2016		114113461101110 : 0017.4024
	Senate	Primary General		
	President	Other (specify) Convention	1	
State: CT	District: 05	<u> </u>		

374.41

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	NUMBE	R:		PAGE	15	OF	22
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page						19a		19b
Detailed Suffillary Fage	20a 20b 20c 21							21
ay not be sold or used by any person for the purpose of soliciting contributions								

		, ,	20a   20b   20c	21
	ny information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any po			
Or	NAME OF COMMITTEE (In Full)	onicai committee	to solicit contributions from such commi	illee.
$ \rangle$	DARIA NOVAK FOR CONGRESS			
	Full Name (Last, First, Middle Initial)			
A.	United States Postal Service		Date of Disbursement	
	Mailing Address 781 Boston Post Road		04 29 2016	Y
	City State Zip Code		Amount of Each Disbursement this P	eriod
	Madison CT 06443			-
	Purpose of Disbursement Postage	003	147.0	0
	Candidate Name	Category/	Memo tem	
	277 2 277 2 277	Туре	Transaction ID : SB17.4624.0	
	Office Sought:  House Senate Primary General Other (specify) Convention			
_	State: District: Full Name (Last, First, Middle Initial)			
В.	DARIA IRENE NOVAK		Date of Disbursement	
	Mailing Address 51 HAMMONASSETT MEADOWS ROAD		05 08 7 Y Y Y Z 2016	Υ
	City State Zip Code		Amount of Each Disbursement this P	Period
	MADISON CT 06443			-
	Purpose of Disbursement Reimburse event attendance costs	216.00 Memo Item		
	Candidate Name	Category/ Type	Transaction ID : SB17.4628	
	Office Sought:    X			
	Full Name (Last, First, Middle Initial)			
C.	DARIA IRENE NOVAK		Date of Disbursement	V
	Mailing Address 51 HAMMONASSETT MEADOWS ROAD		05 25 2016	
	City State Zip Code		Amount of Each Disbursement this P	eriod
	MADISON CT 06443		609.5	0
	Purpose of Disbursement Mileage reimbursement	002	608.5	0
	Candidate Name	Category/ Type	Memo Item	
	Office Sought: X House Disbursement For: 2016	Туре	Transaction ID : SB17.4630	
	Senate Primary General President Other (specify) Convention			
	State: CT District: 05			
s	SUBTOTAL of Disbursements This Page (optional)		824.5	8
-	OTAL This Period (last page this line number only)			
1 1	VIAL THIS I CHOU (last page this line number offly)			

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate scho for each category Detailed Summary	of the	FOR LINE NUMBER: (check only one)    X   17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  DARIA NOVAK FOR CONGRESS			
Full Name (Last, First, Middle Initial)  A. DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT MEADOWS ROA	AD		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State  MADISON CT  Purpose of Disbursement Mileage (loaned back in-kind)	Zip Code 06443	200	Amount of Each Disbursement this Period 219.24
Candidate Name  Office Sought:	For: 2016	002 Category/ Type	Memo Item  Transaction ID : SB17.4640
State: CT District: 05	ary X General er (specify)		
Full Name (Last, First, Middle Initial)  DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT MEADOWS ROA	AD		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State  MADISON CT  Purpose of Disbursement In-kind - Event attendance			Amount of Each Disbursement this Period 25.50
Candidate Name  Office Sought:	For: 2016	007 Category/ Type	Memo Item  Transaction ID : SB17.4654
Senate Prim			
Full Name (Last, First, Middle Initial)  DARIA IRENE NOVAK			Date of Disbursement
Mailing Address 51 HAMMONASSETT MEADOWS ROA	AD Zip Code		06 23 2016
MADISON CT Purpose of Disbursement Mileage reimbursement Candidate Name	06443	002 Category/	Amount of Each Disbursement this Period  241.38  Memo Item
Office Sought:  House Senate President  Disbursement Prim Othe		Type	Transaction ID : SB17.4634
State: CT District: 05			486.12

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

### **SCHEDUI** ITEMIZED

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate so for each categor Detailed Summa	ry of the	FOR LINE NUMBER: PAGE 17 OF 22 (check only one)    X   17
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  DARIA NOVAK FOR CONGRESS	-	, , ,	
Full Name (Last, First, Middle Initial)  A. DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT MEADOWS R	OAD		Date of Disbursement  06 23 2016
Senate Pr	te Zip Code 06443  nt For: 2016 imary X General her (specify)	001 Category/ Type	Amount of Each Disbursement this Period 91.44 Memo Item Transaction ID : SB17.4635
Full Name (Last, First, Middle Initial)  Staples  Mailing Address 1000 Boston Post Road  City Sta Old Saybrook CT  Purpose of Disbursement Office supplies  Candidate Name  Office Sought: House Disbursement Senate Pr	•	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)			

President

#### C. DARIA IRENE NOVAK

Mailing Address 51 HAMMONASSETT MEADOWS ROAD City State Zip Code MADISON СТ 06443 Purpose of Disbursement Mileage reimbursement 002 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate Primary ✓ General

Date of Disbursement

06

30 2016 Amount of Each Disbursement this Period

144.72 Memo Item

Transaction ID: SB17.4637

State: CT District: 05											
	Т								236	.16	
SUBTOTAL of Disbursements This Page (optional)				-		-	-	-			
TOTAL This Period (last page this line number only)		-	-	-	-	-	-	-	-		

Other (specify)

### S ľ

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.  NAME OF COMMITTEE (in Full)  DARIA NOVAK FOR CONGRESS  Full Name (Last, First, Middle Initial)  A Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code CT 08443  Purnose of Disbursement First State President State: District:  Full Name (Last, First, Middle Initial)  B. Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code CT 08443  Purnose of Disbursement For: 2018  Senate President State: District:  Full Name (Last, First, Middle Initial)  B. Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code General President State: District:  Full Name (Last, First, Middle Initial)  Condidate Name  Office Sought: House Disbursement For: 2018  Senate President Senate Primary General P		CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 18 OF 22 (check only one)    X   17
NAME OF COMMITTEE (in Full)  DARIA NOVAK FOR CONGRESS  Full Name (Last, First, Middle Initial)  A. Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City Madison  Cardidate Name  Office Sought:  State  Disbursement For: 2016  City  Memoltem  Transaction ID: SB17.4629  Date of Disbursement this Period  Transaction ID: SB17.4629  Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Date of Disbursement this Period  Transaction ID: SB17.4629  Date of Disbursement this Period  Transaction ID: SB17.4629  Date of Disbursement  Transaction ID: SB17.4638  Date of Disbursement this Period  Calegory Type  Office Sought:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City  State:  Disbursement For: 2016  Period  Cher (specify)  Calegory Type  Office Sought:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City  State:  Disbursement For: 2016  Period  City  State:  Disbursement For: 2016  Period  City  Calegory Type  Office Sought:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City  Calegory Type  Office Sought:  Transaction ID: SB17.4627					
A. Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code Madison CT 08443  Purpose of Disbursement His Period  Office Sought: House Disbursement For: 2016 General Primary General Purpose of Disbursement His Period  Mailing Address 51 Hammonassett Meadows  City State: District: Other (specify) Convention  Date of Disbursement His Period  Amount of Each Disbursement His Period  Mamon Item  Transaction ID: SB17.4629  Date of Disbursement His Period  Transaction ID: SB17.4629  Date of Disbursement Madison  City State Zip Code Madison  City State Zip Code Category/ Type  Office Sought: House Disbursement For: 2016  Category/ Type  Office Sought: House Disbursement For: 2016  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State: Disbursement For: 2016  City State: Disbursement For: 2016  Primary General Other (specify)  Date of Disbursement  Transaction ID: SB17.4638  Date of Disbursement  Memo Item  Transaction ID: SB17.4627  Amount of Each Disbursement  Transaction ID: SB17.4627		NAME OF COMMITTEE (In Full)	, ,		
City State Zip Code Madison CT 06443  Purpose of Disbursement For: 2016  Candidate Name  Office Sought: House President Primary General President Madison  City State Zip Code Madison CT 06443  Purpose of Disbursement For: 2016  City State Zip Code Madison CT 06443  Purpose of Disbursement For: 2016  Category/ Npe  Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Amount of Each Disbursement this Period  Date of Disbursement  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Amount of Each Disbursement this Period  Date of Disbursement  Amount of Each Disbursement this Period  Transaction ID: SB17.4629  Amount of Each Disbursement this Period  Transaction ID: SB17.4627  Amount of Each Disbursement this Period  Date of Disbursement this Period  Transaction ID: SB17.4627  Transaction ID: SB17.4627	A.				
Malling Address 51 Hammonassett Meadows  City Management Services  Candidate Name  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  District:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  Other (specify) Code  Old Saybrook  CT 06475  Category/ Type  Office Sought:  Date of Disbursement this Period  Amount of Each Disbursement  Transaction ID: SB17.4627  Amount of Each Disbursement  Transaction ID: SB17.4627		Mailing Address 51 Hammonassett Meadows			05 25 2016
Caregory/Type		· -			Amount of Each Disbursement this Period
Candidate Name  Office Sought:		Purpose of Disbursement Field Management Services		001	
Senate President Other (specify) Convention  State: District:  Full Name (Last, First, Middle Initial)  Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code CT 06443  Purpose of Disbursement Field Management services  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Category/ Type  Transaction ID: SB17.4638  Date of Disbursement this Period  Transaction ID: SB17.4638  Amount of Each Disbursement this Period  Date of Disbursement this Period  Transaction ID: SB17.4638  Amount of Each Disbursement this Period  Category/ Office Sought: House Disbursement Tor: 2016  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Inic & Category/ Type  Office Sought: House Disbursement For: 2016  Candidate Name  Office Sought: House Disbursement For: 2016  Category/ Type  Transaction ID: SB17.4627			2016		
B. Meilia Picquet  Mailing Address 51 Hammonassett Meadows  City State Zip Code CT 06443  Purpose of Disbursement Field Management services  Candidate Name  Category/ Type  Office Sought: House Primary General State: District:  State: District: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement For: 2016  Category/ Type  Date of Disbursement this Period  Transaction ID: SB17.4638  Date of Disbursement Init Primary Amount of Each Disbursement this Period  Amount of Each Disbursement Init Primary Date of Disbursement Transaction ID: SB17.4638  Date of Disbursement  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Init & cards  Candidate Name  Office Sought: House Primary General Primary General Primary General Primary General Other (specify) Convention		Senate Primary President Other	y General		
Madison CT 06443  Purpose of Disbursement Field Management services  Candidate Name  Category/ Type  Office Sought: House Senate Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City Old Saybrook CT 06475  Purpose of Disbursement Init Period  Amount of Each Disbursement Init Period  Memo Item  Transaction ID : SB17.4638  Date of Disbursement  M M M O 05 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	В.	Meilia Picquet			M M / D D / Y Y Y
Madison CT 06443  Purpose of Disbursement Field Management services  Candidate Name  Category/ Type  Office Sought: House Senate Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City Old Saybrook CT 06475  Purpose of Disbursement Init Period  Amount of Each Disbursement Init Period  Memo Item  Transaction ID : SB17.4638  Date of Disbursement  M M M O 05 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		City State	Zip Code		Assessment of Foods Disks we assessed this Deviced
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Ink & cards  Candidate Name  Office Sought: House Senate Primary General Other (specify) Convention  Date of Disbursement  Amount of Each Disbursement this Period  Amount of Each Disbursement Ink & Category/ Type  Transaction ID: SB17.4627		Purpose of Disbursement	06443		
Office Sought: House Senate Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Ink & cards  Candidate Name  Office Sought: House Senate Primary General Other (specify) Convention  Date of Disbursement  Amount of Each Disbursement this Period  Transaction ID: SB17.4627				Category/	_
Full Name (Last, First, Middle Initial)  C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Ink & cards  Candidate Name  Office Sought: House Senate Primary General President Other (specify) Convention  Date of Disbursement  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: SB17.4627		Senate Primary	y General		Transaction is . SST7.4666
C. Staples  Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Ink & cards  Candidate Name  Office Sought: House Senate Primary General President  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: SB17.4627					
Mailing Address 1000 Boston Post Road  City State Zip Code Old Saybrook CT 06475  Purpose of Disbursement Ink & cards  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Mailing Address 1000 Boston Post Road  O5 06 2016  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: SB17.4627	C.	•			
Old Saybrook Purpose of Disbursement Ink & cards  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Senate President Other (specify) Convention		Mailing Address 1000 Boston Post Road			
Ink & cards  Candidate Name  Office Sought:  House Senate President President  Other (specify) Convention  Memo Item  Transaction ID : SB17.4627		Old Saybrook CT			
Office Sought: House Disbursement For: 2016 Senate Primary General Other (specify) Convention		Ink & cards		Category/	Memo Item
		Senate Primar	y General	71	Transaction ID: SB17.4627
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SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

### SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

	FOR LIN	E NUMB	ER:		PAGE	19	OF	22
Use separate schedule(s) for each category of the Detailed Summary Page	(check or		19a 20c		19b 21			
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	ly information copied from such Reports and Statements may not be sold or used by for commercial purposes, other than using the name and address of any political cor							
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$\rangle$	DARIA NOVAK FOR CONGRESS							
	Full Name (Last, First, Middle Initial)							
A.	Theroux, Nowell & Stoughton LLC		Date	of Disbu	ursement			
	Mailing Address 53 Peck Road		O.		27		2016	
	City State Zip Code		Amo	unt of Fa	ach Disbu	ırsemen	t this P	eriod
	Torrington CT 06790		,		2000			
	Purpose of Disbursement Acounting services		Ш			,	812.50	)
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		egory/						
	Office Sought: House Disbursement For: 2016	/pe	Trans	saction l	D : SB17	.4631		
	Senate Primary General							
	President Other (specify) Convention							
	State: District:							
	Full Name (Last, First, Middle Initial)							
В.	United States Postal Service		Date	of Disbu	ursement			
٠.			M	M /	D D /	YY	Y	1
	Mailing Address 781 Boston Post Road		06	6	06	2	.016	
	City State Zip Code		Amor	unt of Ea	ach Disbu	ırsemen	t this P	eriod
	Madison CT 06443						-	-
	Purpose of Disbursement Postage	200				,	188.00	0
	Candidate Name	003	M	lemo Iten	n			
	Cate	egory/ /pe	_			404=		
	Office Sought: House Disbursement For: 2016	/pe	Irans	saction i	D : SB17	.4647		
	Senate Primary General							
	President Other (specify)							
	State: District:							
	Full Name (Last, First, Middle Initial)							
C.			Date	of Disbu	ursement			
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	Mailing Address							
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	Candidate Name Cate	egory/	Ш"	icino iten				
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	Office Sought: House Disbursement For:							
	Senate Primary General							
	State: District: Other (specify)							
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### SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

20 OF

X 13a

22

13b Transaction ID: SC/10.4134 NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) 'PERSONAL FUNDS] Election: 2016 Memo Item Primary DARIA IRENE NOVAK General X Other (specify) Mailing Address 51 HAMMONASSETT MEADOWS ROAD Convention City State ZIP Code CT 06443 MADISON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25.00 0.00 25.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 <sup>M</sup> 10<sup>M</sup> 09 2015 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 21

×	13a
	13b

OF

22

JANS			Detailed Summary F	Page	(Check only of	ie)	13b
AME OF COMMITTEE (In Full) OARIA NOVAK FOR CONG	RESS		Trans	saction ID	: SC/10.4387		
LOAN SOURCE Full Name (Last, DARIA IRENE NOVAK	First, Middle Initial	)	Memo Item		on: 2016 rimary Seneral		
Mailing Address 51 HAMMONASSETT MEADOWS RO	AD			Xc	Other (specify) vention	▼	
City MADISON	State CT	ZIP Cod 06443	Э				
Original Amount of Loan	Cumula	tive Payment To [	Date B	alance Ou	tstanding at C	Close of Th	nis Period
1091	.80	· · · · · · · · · · · · · · · · · · ·	0.00		, ,	1091	.80
Date Incurred  M 03 / D 31 / Y Z 2016	M M /	Date Due	Interest R	ate 0.00	% (apr)	Secured:	× No
List All Endorsers or Guarantors							
1. Full Name (Last, First, Middle I	nitial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	-,	7		
2. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	,		
3. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	-,	7		
4. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	7		
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### SCHEDULE C (FEC Form 3) L

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 22 OF

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	13b

22

LOANS		Detailed Summary Pa	
NAME OF COMMITTEE (In Full) DARIA NOVAK FOR CONGRESS		Transa	ction ID : SC/10.4639
LOAN SOURCE Full Name (Last, First, Mid DARIA IRENE NOVAK  Mailing Address 51 HAMMONASSETT MEADOWS ROAD	dle Initial)	Memo Item	Election: 2016 Primary General Other (specify)
	04-4- 7ID 0-4		
City MADISON	State ZIP Cod CT 06443	e	
Original Amount of Loan	Cumulative Payment To I	Date Bal	ance Outstanding at Close of This Period
219.24	, , ,	0.00	219.24
Date Incurred  M 05 / D27 / Y Ž016 Y		Interest Rat None 0	se Secured: .00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to  1. Full Name (Last, First, Middle Initial)	Loan Source	Name of Employer	
,			
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 2
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